

Kentucky's Early Childhood Initiative Summary

(Numbers as of June 2004)

Website: kidsnow.ky.gov

In order to reach the goal that **all young children in Kentucky are healthy and safe, possess the foundation that will enable school and personal success, and live in strong families that are supported and strengthened within their communities**, 25% of Kentucky's Phase I Tobacco Settlement dollars fund the early childhood initiative.

Assuring Maternal and Child Health

Healthy Babies Campaign: To plan and implement a public awareness/education campaign to educate the public about fetal alcohol syndrome, the impact of substance abuse on pregnancy and childrearing, the importance of smoking cessation, and about healthy lifestyle choices that help babies to be born healthy. Contact: Division of Early Childhood Development, Dr. Kim Townley - 502/564-8341.

Results

- ❑ 99% of women in the targeted age believe that women their age can take measures to increase their chances of having a healthy baby.
- ❑ There is a general awareness of the value of avoiding drug use, getting exercise and rest, taking care of one's general health and having the B Vitamin in their diet.
- ❑ Over half, but no more than two-thirds, of the women surveyed would make changes in their lifestyles if they became pregnant.

Activities

FY 04

- ❑ Collaboration with the Tobacco Prevention and Cessation Program to use the Healthy Babies spots on TV for 6 months (January – June 2004).

FY 02

- ❑ Contract awarded to Prime Meridian August 2001.
- ❑ State and local media campaign occurred in December 2001 - June 2002.
- ❑ 800,000 pieces of education material distributed with partner agencies in health, social services, and community organizations.
- ❑ Toll free number (1-866-929-BABY) established and a new website (myhealthybaby.com) for target population to get more information.
- ❑ Newborn babies in Kentucky in 2002 were sent home with videotape on the importance of the first years and a Kentucky Family Guide.

FY 01

- ❑ Work group plan approved by Early Childhood Development Authority January 2001.
- ❑ RFP distributed May 1, 2001.

Folic Acid Campaign: To prevent the high incidence of spina bifida and related defects in Kentucky by providing all women of childbearing age access to the B vitamin Folic Acid, a known preventive measure.

FACT: An estimated 50-70% of such birth defects are preventable through the ingestion of folic acid prior to pregnancy and in the early prenatal period. The average total lifetime cost to society for each infant born with spina bifida is approximately \$532,000 and for many children the cost may be well above \$1,000,000. Based on Kentucky's incidence of neural tube defects for the past six years the average estimated annual cost to Kentucky residents is 12.1 million dollars. Contact: Department of Public Health, Dr. Steve Davis – 502/564-4830 or Sandy Cleveland – 502/564-2154.

Results

- ❑ In 1996 there were 66 babies born with neural tube defect in Kentucky compared to 26 in 2001, according to the Kentucky Birth Surveillance Registry. This represents a 60% decline in these serious birth defects of brain and spine.
- ❑ The percentage of women 18-44 reporting knowledge of folic acid aiding in the prevention of birth defects went from 32.3% in 1997 to 48.1% in 2001, according to the Kentucky Behavioral Risk Factor Surveillance Survey (BRFSS).
- ❑ The percentage of women 18-44 reporting taking a multivitamin or supplement containing folic acid on a daily basis went from 29.9% in 1997 to 39.6% in 2001, according to the BRFSS.

Activities

FY 04

- ❑ 87,279 women have received multi vitamins including folic acid and counseling.

FY 03

- ❑ In addition to the 120 health departments, folic acid tablets and counseling are being provided at 6 state universities.
- ❑ 83,714 women have received folic acid tablets and counseling.
- ❑ 32,102 participants were reached in statewide folic acid activities from July 2002 – July 2003 through the efforts of the Folic Acid Partnership.

FY 02

- ❑ 110,623 women have received folic acid supplements and nutritional counseling.
- ❑ 862,500 Kentuckians were reached with the folic acid message through community and professional events and thousands more through radio, TV and news articles.
- ❑ During the week of Mother's Day, restaurants statewide distributed 400,000 tray lines having the folic acid message.

FY 01

- ❑ Folic Acid Nursing Coordinators in all 120 county health departments were trained to promote folic acid supplementation and to counsel young women on the importance of folic acid.
- ❑ 43,500 women have received folic acid supplements and nutritional counseling.
- ❑ Folic Acid Educational Kits mailed to 3,400 physicians and nurse midwives statewide.
- ❑ Kentucky Folic Acid Partnership composed of 55 agencies report 580 community and professional activities reaching 49,870 participants statewide.

Substance Abuse Treatment Program for Pregnant and Post-partum Women: To assist women with current or prior substance abuse problems to bear healthy babies and to remain free of substance abuse behaviors in the future and to provide prevention services. **FACT:** Pregnant females using alcohol, drugs and tobacco are one of the most hard-to-reach, and costly subpopulation in Kentucky. Babies born to addicted mothers can be affected by fetal alcohol syndrome, delays and mental retardation, low birth weight and other health issues. Further costs in special education and foster care or treatment can occur. Contact: Department of Mental Health and Mental Retardation Services, Amy Baker - 502/564-2880.

Results

- ❑ KIDS NOW provides support that allows substance abuse programs to be on-site at public health departments and private physician offices to reach more of the target population.

Activities

FY 04

- ❑ Over 3,681 pregnant women are receiving prevention or treatment services.
- ❑ Over 8,414 pregnant women have received screening services regarding risk of substance use during pregnancy.
- ❑ Linkages with over 80 community agencies and health departments have been established.

FY 03

- ❑ Linkages with over 50 community agencies and health departments have been established.
- ❑ Quarterly network meetings are held with community providers.

FY 02

- ❑ Individual incentives offered for delivering healthy baby and remaining in program.
- ❑ Funding for methadone treatment and transportation for narcotic addicted pregnant women (including oxycontin).
- ❑ From July 1, 2001 through May 1, 2002, 3,405 pregnant women have been screened or referred, 548 have been assessed and 1,940 have entered prevention or treatment services as a result of this initiative.
- ❑ Over 75 practitioners have been trained in administration of substance abuse screening tool for use with pregnant women.

FY 01

- ❑ Division of Substance Abuse received support from the Kentucky Medical Association encouraging physicians to screen and refer pregnant women for needed substance abuse prevention and treatment services.

Universal Newborn Hearing Screening: To assist hospitals in implementing universal hearing screening on newborns prior to hospital discharge. **FACT:** 38 states currently have universal newborn screening laws. At the rate of 3 per 1000 births, hearing difficulties are the most common sensory birth defect. The average \$20 cost per child for a reliable hearing screening before hospital discharge is covered by KCHIP and by Medicaid for eligible populations. Early detection and appropriate tracking and follow-up are vital to the development of the child. The cost of educating a deaf child in a residential program is approximately \$27,000 as compared to \$6,000 annually for the child who is diagnosed early and served in a typical classroom. Contact: Commission for Children with Special Health Care Needs, Michelle King – 502/595-4459 ext. 323 and 877/757-4237 or Eric Friedlander – 502/595-4459 ext. 271.

Results

- ❑ 99% of Kentucky newborns have their hearing screened before they leave the hospital.
- ❑ Follow-up within 3 months.
- ❑ Enrollment in intervention services within 6 months.

Activities

FY 04

- ❑ During FY 04, 52,503 hearing screen report forms were submitted to UNHS. Of those babies screened 5,222 were at-risk for hearing loss. Of the infants at-risk for hearing loss, 2,111 were referred for additional testing.

FY 03

- During FY 03, 50,038 hearing screen report forms were submitted to UNHS, 49,580 (99.08%) were screened before hospital discharge. Of those babies screened, 3,913 (7.89%) were at-risk for hearing loss. Of the infants at-risk for hearing loss, 1,932 (49.37%) were referred for additional testing.

FY 02

- During FY 02, 45,017 children were screened or 98.83% of infants on whom a hearing screening report form was received. Of these screened, 4,949 were found to be at risk because of health or family history, failed or had no screen; of these 1,545 children failed the screen.
- Deaf and Hard of Hearing and other public and private entities statewide to provide outreach to families, health departments, physicians, schools and other community based organizations.

FY 01

- Kentucky Infants' Sound Start (KISS) fully implemented beginning January 2001 with 41,405 (85.38%) infants having been screened.
- A system is in place to refer families for follow-up testing within 3 months and intervention within 6 months.

Immunization Program for Underinsured Children: To achieve 100% immunization coverage by age three. **FACT:** Vaccines are among the most cost-effective tools in preventing and controlling infectious diseases. For every dollar spent on vaccines, it has been estimated that up to \$24 in additional health care costs are saved. It has been estimated that 17% of children ages birth to three years old are underinsured. The purchase of vaccines to cover this population of children who are non-Medicaid and non-KCHIP eligible will increase access to immunizations. Contact: Department of Public Health, Dr. Steve Davis – 502/564-4830 or Victor Negron 502/564-7243.

Results

- In 2000, funds were provided through the KIDS NOW Early Childhood Initiative for the purchase of vaccine for underinsured children. The purpose of this initiative is to keep children in their medical homes and decrease chances for missed opportunities to immunize. With the implementation of this initiative, along with other state programs such as KCHIP, all children in Kentucky should be able to receive vaccines either through private insurance or with the assistance of federal and state funds. To date, over 20,000 immunization services have been provided to underinsured children through this program.

Activities

FY 04

- 6,132 immunization services provided to underinsured children.
- Letter sent to all participating physicians and clinics encouraging providers to redouble efforts to identify and serve underinsured children.

FY 03

- 6,173 children have received vaccinations.

FY 02

- Over 246,000 vaccine doses distributed to physicians since July 2000.
- Approximately, 17,000 underinsured children immunized since July 2000.

FY 01

- Training has been provided to all physician participants.
- Fully implemented August 2000.

Eye Examinations For Children: To require all children to submit evidence of an eye examination (not a screening) no later than Jan. 1 of the first year of public school entry for ages 3, 4, 5, and 6. Funds are available through the Commission for Children with Special Health Care Needs to assist children who are neither Medicaid nor KCHIP eligible and who do not have sufficient resources to pay for the cost of an eye examination. **FACT:** Screening alone often misses visual difficulties such as amblyopia that have the potential for reversal if diagnosed and treated before the age of five. Contact: Division of Early Childhood Development, Dr. Kim Townley – 502/564-8341, the Commission for Children with Special Health Care Needs, Eric Friedlander 502/595-4459 ext. 271, Jackie Ferguson – 800/232-1160.

Results

- ❑ 13.9% of the children have needed corrective lenses.
- ❑ 3.40% diagnosed with amblyopia.
- ❑ 2.31% diagnosed with strabismus.

Activities

FY 04

- ❑ 19 children have accessed funds.

FY 03

- ❑ 46 children accessed the funds.

FY 02

- ❑ 80 children accessed the funds this fiscal year.
- ❑ Vision services and corrective lenses provided for children 3-6 years old who were KCHIP and Medicaid eligible has increased by more than 50%.

FY 01

- ❑ 285 optometrists/ ophthalmologists have contracted with the Commission for Children with Special Health Care Needs to conduct the eye exams.
- ❑ Commission for Children with Special Health Care Needs is working with health departments, the Family Resource Youth Service Centers, and Kentucky Optometric Association to identify families between 200-250% of poverty to receive help in paying for the eye exam.
Optometrists/ophthalmologists are reimbursed at \$40/exam and the family is asked for a \$5 co-pay.
- ❑ 71 children accessed the funds in the first year.

Oral Health Education and Prevention Program: To prevent early childhood caries (ECC) through: (1) targeted early screening, (2) oral health education of caregivers, (3) application of a fluoride varnish to primary teeth (baby) if necessary, and (4) proper referral to a dentist if appropriate for care. **FACT:** ECC is highly preventable and at an affordable cost. From the 2001 Kentucky Children's Oral Health Survey, nearly one-third of a sample of 2-4 year olds was affected by ECC. Rehabilitation of severe ECC can be more than \$5,000. Contact: Department of Public Health, Dr. Steve Davis – 502/ 564-2154 or Dr. Jim Cecil – 502/564-3246.

Results

- ❑ 793 health department nurses and other providers trained in KIDS SMILE.
- ❑ Approximately 13,091 children have been provided oral health screening and applications of fluoride varnish in local health departments.

Activities

FY 04

- ❑ Provided training at 23 sites to approximately 700 health department nurses and other providers.
- ❑ Provided over 30,620 pre-packaged fluoride varnish kits to local health departments.
- ❑ Developed a database for monthly tracking and reporting applications of fluoride varnish.

FY 03

- ❑ Oral Health program developed and pilot tested, finalized December 2002.
- ❑ Provided training at five sites to health department nurses and other providers.
- ❑ Provided health promotions/prevention messages to caregivers.

Supporting Families

HANDS Voluntary Home Visiting Program: To provide a voluntary home visitation program for first time parents in order to promote the healthy growth and development of the child. Contact: Department of Public Health, Dr. Steve Davis – 502/564-4830 or Brenda Chandler – 502/564-2154.

Results

- ❑ HANDS families deliver more full-term babies, a lower number of low birth weight and very low birth weight babies resulting in healthier children.
- ❑ Current estimates show potential savings of \$4.7 million a year.
- ❑ HANDS families exhibit less child abuse (58% less) and less neglect (62% less) than the control group of families who were eligible but did not participate.

Activities

FY 04

- ❑ 10,756 families receiving services.
- ❑ 259 families declining services.
- ❑ 857 families exiting the program.
- ❑ 48,539 professional home visits conducted.
- ❑ 81,225 paraprofessional home visits conducted.

FY 03

- ❑ All 120 counties with HANDS programs.
- ❑ 8,789 families receiving services.
- ❑ 5,248 assessments conducted
- ❑ 35,670 professional home visits conducted
- ❑ 69,622 paraprofessional home visits conducted

FY 02

- ❑ In 103 counties, with over 6,643 families receiving services July 1 through June 30, 2002.
- ❑ Over 69,200 home visits made from July 01 through June 02.
- ❑ Participant profile for FY 02 show: Mother's age 53%, 16-20 yr.; 30%, 21-25 yr.; 17%, over 25 and Single/separated/divorced-67%; 84% Caucasian, 9% African American; 14% mothers employed full-time, 11% part-time; 53% fathers employed full-time, 12% part-time.

FY 01

- ❑ Local technical assistance personnel hired and trained and approximately 300 home visitors hired by local health departments were trained and working with families.
- ❑ Operational in 47 counties, with over 3,800 families enrolled.
- ❑ 30,000 home visits made July 00 – June 01.

Early Childhood Mental Health Program: To provide mental health consultation for early childhood programs, assessment and therapeutic services for young children and their families as appropriate. **FACT:** It is estimated that one of every 10 children and adolescent has a mental health challenge. Strategies to meet the need exist; personnel have been trained to deliver the services to young children and their families. Contact: Department of Public Health, Dr. Steve Davis 502/564-4830, Mary Beth Jackson 502/564-3527 or the Department of Mental Health and Mental Retardation Services, Beth Armstrong 502/564-4448.

Results

- ❑ Children and their families in early childhood programs are receiving services.
- ❑ A network of early childhood mental health specialists across the state is being built.

Activities

FY 04

- ❑ 2, 214 children and families have received services.
- ❑ 8 regional trainings have been presented to specialist and other mental health professionals.
- ❑ ECMH specialist have contacted most of the child care centers and other early childhood programs to introduce the program.

FY 03

- ❑ 14 Early Childhood Mental Health Specialists hired by the Regional Community Mental Health Centers. Training in progress.
- ❑ The ECMH Specialists have completed three local trainings and more in-depth training presented by Dr. Stanley Greenspan.
- ❑ All of the ECMH Specialists have contacted most of the Child Care Centers and other Early Childhood programs in their communities to introduce this initiative.

FY 02

- ❑ 13 intervention specialists in community mental health centers have been trained in FY 01.

Children's Advocacy Centers: To mitigate the physical and mental health impact of sexual abuse inflicted on a child by providing comprehensive, state-of-the-art medical examinations. This funding will fund staff in Children's Advocacy Centers to provide and coordinate medical examinations for sexually abused children, create a statewide telehealth program for these agencies and support state-of-the-art training for physicians. The funds will increase by 50% the number of exams done for children, will facilitate development of a statewide telehealth program and provide one statewide physician training annually. **FACT:** In FY 2000, over 3,600 children were served annually by Children's Advocacy Centers, and over 1000 medical exams were provided. Medical examinations are necessary to mitigate the physical and mental health impact of abuse of these children. Contact: Division of Child Abuse and Domestic Violence Services, Tamra Gormley – 502/564-9433.

Results

- ❑ Created 4 Medical Unit Coordinators whose duties include, but are not limited to: billing, scheduling, physician assistance during the exam, physician recruitment, implementation of policy and procedure, safety within the medical unit, case management, follow-up and support for the multi-disciplinary team members. Because of the implementation of this position within the Centers, it is almost unanimous that quality and efficiency have improved.

Activities

FY 04

- ❑ 1,593 children under the age of five were seen in the Children's Advocacy Centers.

FY 03

- ❑ 1,202 children under the age of five were seen in the Children's Advocacy Centers.
- ❑ Funds support Medical Unit Coordinators for 4 Children's Advocacy Centers. Those centers provided 253 specialized forensic medical examination to children alleged to have been sexually abused.
- ❑ On a quarterly basis approximately 400 children under the age of five are seen in the Children's Advocacy Centers.

Enhancing Early Care and Education

Access to Child Care Subsidy: To increase the reimbursement to child care centers and licensed family child care homes who provide care to low-income families by increasing the percentage of eligible children.

FACT: By increasing the eligibility from 160% of the federal poverty level to 170% FPL, an estimated 12,000 *additional* children will be covered by eligibility guidelines thereby increasing access to care for low-income families. Contact: Division of Child Care, Mike Cheek – 502/564-2524.

Results

- ❑ 50,000 served per month after eligibility decreased to 150% of poverty after May 1, 2003.
- ❑ 56,000 children served per month before cost containment at 165% of poverty.

Activities

FY 04

- ❑ 5,649 children that were on the waiting list affecting 3,466 families have been served.
- ❑ 82,573 children receiving subsidy, unduplicated count.

FY 03

- ❑ May 1, 2003 intake/enrollment of families was stopped, except for TANF families, teen parents, and protection & permanency families.
- ❑ 56,000 children served per month, due to the lack of state and federal dollars steps are being taken to contain costs.
- ❑ \$4,856,194 expended.

FY 02

- ❑ Early Childhood Development Authority recommended that \$3M be used to serve those who need child care assistance up to the 165% of poverty, and not limit funds to serving only those who are between 160-165% of poverty.

FY 01

- ❑ Moved to 165% of poverty October 2000.
- ❑ 54,716 children served by the Child Care Assistance Program from April – June 2001.

STARS for KIDS NOW: A voluntary quality rating system to raise the level of quality in early care and education child care by offering a system of incentives and rewards based on research based identified characteristics associated with positive outcomes for children and families and by offering technical assistance to achieve quality indicators. **FACT:** Children cared for in high quality settings perform significantly better in math, language, and social skills at school entrance than did their peers in programs of poor quality, according to studies published. Contact: Division of Early Childhood Development, Mary Howard – 502/564-8341 or Division of Regulated Child Care, Rob Hester – 502/564-2800.

Results

- ❑ Over 550 centers and 150 family child care homes have a STARS for KIDS NOW rating.

- ❑ Over 40,000 children are receiving higher quality early care and education each day.

Activities

FY 04

- ❑ 1,246 Quality Incentive Awards have been disbursed: Centers /Homes \$756,204.
- ❑ 578 Achievement Awards have been disbursed: Centers /Homes \$316,400.

FY 03

- ❑ Quality Incentive Awards have been disbursed: Centers /Homes \$429,930.
- ❑ Achievement Awards have been disbursed: Centers /Homes \$269,800.

FY 02

- ❑ Statewide rollout of STARS for KIDS NOW for child care centers began July 2001
- ❑ 475 centers have received a STAR rating. These centers serve over 30,000 children.
- ❑ \$242,100 achievement awards paid and \$170,238 subsidy increases paid through July 2002 to STAR centers.
- ❑ Piloting of the STARS for KIDS NOW for family child care (Type II and certified homes) was conducted January–June 2002. 36 family child care homes received a STAR rating. These homes serve a total of 198 children.
- ❑ A total of \$12,400 was paid in Quality Achievement and \$2,070 in Quality incentives to STAR homes during the pilot period.
- ❑ 18 Infant Toddler Specialists located in the Child Care Resource and Referrals provide technical assistance to centers and family child care homes.

FY 01

- ❑ Piloting of the STARS for KIDS NOW was conducted in 17 counties across the state, January – June 2001. 88 child care centers volunteered to participate in the pilot, with 77 receiving a rating, 4,200 children receiving enhanced care in these centers.
- ❑ 50 centers received STAR Achievement Awards. 28 centers received Quality Incentive Awards.
- ❑ 18 Quality Coordinators, located in the Child Care Resource and Referral Agencies, provided technical assistance to Type I centers.

Scholarship Fund for Childcare Providers: To provide a scholarship fund administered through the Ky. Higher Education Assistance Authority available to those who work in early care and education or as assistants in preschool classrooms at least 20 hours weekly. The funds assist early care and education personnel in moving through a credentialing system that begins at entry level and proceeds through post-secondary education. **FACT:** The quality of early care and education is closely associated with the education and training levels of the providers. Early care and education personnel are among the most poorly paid individuals in the workforce and therefore need assistance and incentive to increase their educational achievement and to permit movement up the career ladder in early childhood. Contact: Division of Early Childhood Development, Albert Fox – 502/564-8341.

Results

- ❑ 702 Commonwealth Child Care Credentials have been awarded/renewed.
- ❑ 991 CDA mini-grants have been awarded.
- ❑ 56% of the scholars are attending KCTCS.
- ❑ 44% of the scholars are attending Universities.
- ❑ 92 Director Credentials have been awarded.
- ❑ 505 Trainer Credentials have been awarded.

Activities

FY 05

Fall term 2004, 930 scholarships awarded.

FY 04

- ❑ Fall term 2003, 731 scholarships awarded.
- ❑ Spring term 2004, 872 scholarships awarded.
- ❑ Summer term 2004, 430 scholarships awarded.
- ❑ 885 Non-college scholarships awarded

FY 03

- ❑ Fall term 2002, 718 scholarships awarded.
- ❑ Spring term 2003, 768 scholarships awarded.
- ❑ Summer term 2003, 380 scholarships awarded.

FY 02

- ❑ Fall term 2001, 537 scholarships awarded.
- ❑ Spring term 2002, 691 scholarships awarded.
- ❑ Summer term 2002, 352 scholarships awarded.
- ❑ Two additional professional development counselors have been hired.
- ❑ Thirteen contracting agencies were approved to offer training for the Commonwealth Child Care Credential and the CDA. As a result, 34 Commonwealth Child Care Credentials were awarded.

FY 01

- ❑ Beginning January 2001, 516 scholarships awarded representing 25 public and 5 private colleges and universities.
- ❑ Ten professional development counselors hired and trained in the Child Care Resource and Referral Agencies across the state.

Training Into Practice Project: To provide opportunities for early childhood trainers and higher education to have access to knowledge and training that will develop and enhance skills as a trainer of adults working with young children and families. Contact: TIPP Director, Carol Schroeder at 859-257-2085 or Division of Child Care, Mike Cheek at 502-564-2524.

Results

- ❑ Six-week and Six-month follow-up surveys sent to 10% of the FET participants show that participants have changed how they conduct training in the following ways: spend more time considering the location and set-up of the room; use a greater variety of training methods in consideration of the different styles of learning; develop and use written needs assessments; use ROPES and an outline to help organize training; use more interactive training techniques; narrow the topic in order to cover in-depth; plan time for feedback and follow-up.

Activities

- ❑ ***Fundamentals of Effective Training Seminar (FET)***
FY 04 – 28 FET seminars have been conducted since May 2002, with 841 early childhood trainers completing the two-day seminar.
FY 03 – 417 early childhood trainers have completed this 2-day seminar.
- ❑ ***Trainers Institute***
FY 04 – The 2004 Training of Trainers Institute was held May 14 in Lexington, with pre-conference sessions on May 13. Both national and state speakers presented interactive sessions on topics related to effective training strategies. A total of 100 trainers attended.
FY 03 – The annual Institute for early childhood trainers was held May 9, 2003, with 70 participants.

□ ***Beyond Fundamentals***

FY 04 – Eight training-of-trainers modules have been developed that build on topics covered in *Fundamentals of Effective Training*. These modules on effective training methods will be delivered regionally to early childhood trainers during the next two years by six Master Trainers, who were selected based on their experience and expertise in training adult learners. Clock hours obtained through participation will be applied towards renewal of the Trainer's Credential.

□ ***Dial-a- Discussion***

FY 04 – Monthly calls for trainers have been held for graduates of FET since January 2003. In September 2003, monthly calls for directors who have attended one of the Directors Seminars were added. During calls, participants have an opportunity to discuss strategies they have implemented since attending training and gain new ideas from other participants and from the facilitator. Then, following the call, participants are sent a summary of the ideas and strategies shared as well as an evaluation to be completed. Clock hours are awarded for participation and completion of activities. As of June 30, 2004, a total of 18 D-A-Ds for trainers have been held with 292 participants. During the year, 11 D-A-Ds for directors were held, with 30 participants.

FY 03 – Eight Dial-A-Discussion calls were held on various topics with 53 different participants. These one-hour conference calls are designed as a follow-up for trainers who have participated in *Fundamentals of Effective Training* seminars.

□ ***Trainer E-Exchange***

FY 04 – Topics related to FET and Dial – A – Discussion have been posted to provide additional opportunities for trainers to share ideas and ask questions.

FY 03 – An electronic bulletin board has been established for communication of questions and solutions.

□ ***Early Care Orientation On-Line (ECool) (Orientation for Early Care and Education Professionals.)***

FY 04 – The three required modules for orientation of new child care staff (Health, Safety, & Sanitation; Recognizing and Reporting Child Abuse; Recommended Practices in Early Care, and Education) have been available on the KYVU website since July 2003. Since then, 467 students actively worked on the course; of these, 314 completed all activities and received certificates. Participants were from more than 65 different counties in Kentucky.

FY 03 – Input was solicited from a broad spectrum of stakeholders in January. A Memorandum of Understanding with Kentucky Virtual University was completed to put Early Care Orientation On-line (ECool) on their web site, beginning July 1, 2003.

□ ***Early Childhood Professional Development Framework Training***

FY 04 – These informational sessions on Kentucky's early childhood professional development framework were held at several conferences and Super Saturdays during the summer and fall of 2003. Most sessions were jointly conducted by a representative from the Division of Early Childhood Development (DECD) and TIPP staff. An additional session was held at the FET seminar in June 2004. Since March 2003, a total of 21 sessions have been conducted with 423 participants attending and receiving a copy of the manual, *Early Childhood Professional Development: Creating a Framework for Kentucky*. Currently, the manual is on the KIDS NOW website.

FY 03 – Eleven 2 1/2-hour sessions were provided across the state with 289 participants. Each participant received a copy of *Kentucky Early Childhood Professional Development Framework book*.

□ ***Linking Staff Training to the Workplace Series***

FY 04 – During Fall 2003, Directors Seminars II were added to the series. Directors Seminar II focuses on strategies to promote transfer of knowledge and skills from training to the work environment. A total of 19 Directors Seminar I and two Directors Seminar II sessions have been held since Spring 2003, with 278 directors participating.

FY 03 – Eight sessions of Directors Seminar I were provided across the state. This training addresses how child care directors can use early childhood core content for professional development administrative tasks, such as writing job descriptions, self-assessment of competencies and knowledge, completing professional development plans, and conducting staff reviews.

❑ ***Training Credential Review and Recommendations***

FY 04 – The Trainer’s Credential Review Panel has been meeting monthly since April 2003. Panel members review applications to ensure that qualifications are met for the level of Credential that is being sought and make recommendations to the Cabinet for Health and Family Services, who then award the Credentials. As of June 30, 2004, 693 applications have been reviewed by the Panel. Of these, 572 applicants have been recommended for a Credential; others are pending, requiring additional documentation for approval.

FY 03 – The application form and process for obtaining a Trainer’s Credential was developed. Nominations for Review Panel members were solicited. Panel members were appointed, and the Panel reviewed 80 applications.

Increased Licensing Personnel: To hire additional licensing personnel dedicated specifically to child care who bring expertise to upgrade child care quality. **FACT:** 1999 caseloads averaged 100 facilities per worker (exceeding national standard of 50 facilities) and included facilities other than child care. High case numbers preclude anything but monitoring for compliance with minimal standards and leave no time for assessing quality. Few workers had backgrounds in early childhood. Contact: Division of Child Care, Mike Cheek – 502/564-2524 or the Department of Regulated Child Care, Rob Hester – 502/564-2800.

Results

- ❑ Approximately 41,000 children are served in higher quality settings as rated STARS for KIDS NOW.
- ❑ Since July 1, 2001 74% of centers with more than one rating have moved to increase quality and a STAR rating.

Activities

FY 04

- ❑ 547 Star Rated Centers and 163 Star Rated Family Child Care Homes.

FY 03

- ❑ 525 Star Rated Centers and 121 Star Rated Family Child Care Homes.

FY 02

- ❑ Worked with Division of Early Childhood Development, Division of Child Care, and Kentucky Association of Child Care Resource and Referral Agencies to implement the STARS for KIDS NOW quality rating system.
- ❑ Three quality raters from each of the four licensing regions to do ratings for STARS for KIDS NOW.

FY 01

- ❑ New Department of Licensed Child Care established.
- ❑ New licensing surveyors hired and participated in on-going training. (4 Regional Program Managers, 10 STAR Team Raters, and 34 Child Care Surveyors)

Healthy Start in Childcare: To provide personnel to train and educate early care and education staff and parents in health, safety, nutrition, and the benefits of early intervention. Emphasis is also placed on the prevention of communicable diseases in-group settings and the social/emotional well being of children.

FACT: There are approximately 2,040 licensed child care facilities in Kentucky, and 1,100 certified family child care homes that will benefit from assistance to upgrade health and safety conditions. Contact: Department of Public Health, Dr. Steve Davis – 502/564-4830 or Sue Bell – 502/564-3527.

Results

- ❑ 88 Trained Healthy Start consultants provide free technical assistance in areas of health, safety and nutrition.
- ❑ Early care and education settings are safer and provide more quality.

Activities

FY 04

- ❑ 76,901 Education Services (including consultation, playground consults, DECA administration, classes) provided to early childhood settings.

FY 03

- ❑ 8,534 phone consultations, 3,131 on-site consultations and 210 playground inspections provided.
- ❑ 3,239 classes on health, safety, and nutrition were presented by 79,169 child care providers, parents and children in collaboration with the Child Care Resource and Referral Agencies.
- ❑ Collaboration with Early Childhood Mental Health specialists. 44 DECAs were administered with 21 children referred to mental health specialists.

FY 02

- ❑ Healthy Start consultants provided 5,649 phone consults, 4,899 on site consultations, and 264 playground consultations.
- ❑ Provided 2,874 classes on health, safety, and nutrition to 60,897 child care providers, children, and parents.
- ❑ 85 trained Healthy Start consultants are available to provide services in all 120 counties.

FY 01

- ❑ 88 trained Healthy Start Consultant are available to provide services in all 120 counties.
- ❑ 6,050 outreach activities (letters, brochures, newspaper) have been conducted.
- ❑ 2,122 consultations by phone or on-site have been completed.
- ❑ Consultants have been trained on early childhood social/emotional well-being and will implement the DECA (Devereaux Early Childhood Assessment) tool in October. The DECA is an observation assessment tool for children ages 2-5 that can be used by parents and teachers to help build resiliency in children.

Community Early Childhood Council Funding: To form community councils to improve the lives of children and families. Potential member agencies and individuals are identified in HB 706. Service area defined as no smaller than a county. **FACT:** Approximately 103,000 of Kentucky's young children are in child care. According to national standards, much of Kentucky's child care is judged to be of poor quality and yet providers often cannot afford the expense associated with increasing quality. Funding through councils will offer seed money to make needed system improvements at the local level according to specified criteria through the use of non-recurring dollars. Contact: Division of Early Childhood Development, Hanan Osman – 502/564-8341.

Results

- ❑ 90 Councils representing 117 counties exist.

Activities

FY 05

- ❑ 77 councils representing 102 counties received funding in FY 05 to improve early care and education.

FY 04

- ❑ 82 Grant proposals were received by April 19th deadline representing 108 counties.
- ❑ Five technical assistance meeting across the state were held.

- ❑ RFP released January 2004.
- ❑ 81 councils representing 99 counties received funding in FY 04 to improve early care and education.

FY 03

- ❑ Programs monitored.
- ❑ Review team evaluated proposals.
- ❑ Summaries of CECC's work on website.

FY 02

- ❑ 103 Community Early Childhood Councils formed representing all 120 counties.
- ❑ 67 councils funded for projects to improve early care and education.
- ❑ January 02 new RFP released and 25 proposals received for first year funding in FY 03.

FY 01

- ❑ Family Resource Youth Service Centers and Child Care Resource and Referral Agencies worked with existing entities in counties to convene Community Early Childhood Councils.
- ❑ First biennium funding devoted to improving the quality and availability of child care.
- ❑ Request for Proposals were released March 2001, with 93 grant applications received by May 2001.

First Steps: Kentucky's Early Intervention System: To serve children from birth to age 3 who have a developmental delay or a particular medical condition that is known to cause a developmental delay. **FACT:** The First Steps program is increasing approximately 20% annually. Last year over 9,800 children were served at an average cost of \$4,000 per child. Contact: Department of public Health, Germaine O'Connell – 502/564-3236 x 3763.

Establishing the Support Structure

Early Childhood Development Authority: To receive and disburse funds and to coordinate the development of programs supported by the funds. The Early Childhood Development Authority merges four existing Councils for efficient coordination of issues related to early childhood. Contact: Division of Early Childhood Development, Dr. Kim Townley – 502/564-8341.

- ❑ Appointed by Governor and meeting on a regular basis to conduct business.

Business Council: To involve the corporate community and local governments in supporting issues of importance to working families in Kentucky. The Business Council is comprised of business and community leaders who have demonstrated an interest in early childhood and families in the workplace. Contact: Division of Early Childhood Development, Dr. Kim Townley – 502/564-8341.

- ❑ Appointed by Governor and is meeting at quarterly.

Professional Development Council: To work with existing entities to create a seamless system of education and training for early childhood providers, beginning with an entry level credential and proceeding through a Master's degree. Contact: Division of Early Childhood Development, Nancy Newberry – 502-564-8341.

- ❑ As per HB 706 the Professional Development Council sunsets June 2004.
- ❑ Appointed by Governor and met quarterly.
- ❑ Approval granted for new early childhood credentials, trainers' credential, and early childhood core content levels and levels of training, currently being implemented.

Evaluation of Initiative: To ensure effective use of funds in achieving targeted outcomes across settings statewide. Contact: Division of Early Childhood Development, Dr. Kim Townley – 502/564-8341.

- ❑ Contract with UK/UL completed and the research team currently working.

Program Improvements

Training: Requires the Cabinet for Families and Children to set training requirements for all providers of child care who receive a state child care subsidy. Contact: Division of Child Care, Mike Cheek-502/564-

2524.

- ❑ Relatives providing care must meet same requirements as registered home providers beginning April 2001.
- ❑ Regulation filed to require training for registered providers in July 2001.
- ❑ Contract pending with Kentucky Association for Child Care Resource and Referral Agencies for expanding services to registered child care providers.
- ❑ Healthy Start in Child Care providing assistance to licensed, certified, and enrolled providers relating to safety and nutrition.

Child Safety in Childcare: Allows the Cabinet for Families and Children (through Cabinet for Health Services Office of Inspector General) to assess penalties to facilities when an inspector finds a situation that poses an immediate threat to the health, safety, or welfare of children. In addition to a hearing, an informal dispute resolution process is established prior to an action that could result in the closure of a child care facility. Contact: Division of Child Care, Mike Cheek-502/564-2524.

- ❑ Cabinet for Health Services implemented the civil penalties and informal dispute resolution for licensed child care facilities.
- ❑ Civil Penalties collected annually are placed in Early Childhood Development Scholarship Fund for professional development of child care employees.